

## STATE OF MISSOURI

## OFFICE OF ADMINISTRATION, DIVISION OF PERSONNEL

## TRANSFER/REEMPLOYMENT FORM FOR UNIFORM CLASSIFICATION AND PAY (UCP) AGENCIES

Employees and former employees have the option of applying directly to agencies for transfer and reemployment opportunities, respectively, or applying to the Division of Personnel for placement on Transfer and Reemployment lists. When applying to the Division of Personnel, this form is to be used. The Transfer and Reemployment lists, which are maintained by the Division of Personnel, are optional for use by the agencies, and do not necessarily guarantee consideration for transfer and reemployment opportunities. Individuals remain on the Division of Personnel's Transfer and Reemployment lists for a period of one year.

IDENTIFICATION AND PERSONAL DATA				
LAST NAME	FIRST	MIDDLE	SOCIAL SECURITY NUMBER	
HOME ADDRESS – STREET	CITY	STATE	ZIP CODE	
PREVIOUS NAME(S) WORKED UNDER	Т	ELEPHONE NUMBER-PRIMARY	SECONDARY ( ) -	
I Request TRANSFER (BOTH CRITERIA MUST BE MET)  I am:		I have:  previously been employ  successfully completed	(ALL CRITERIA MUST BE MET)	
Job Classification (List only the classification you are currently holding)			Job Classification(s)	
Types Of Employment You Would Accept:		Types Of Empl	Types Of Employment You Would Accept:	
☐ FULL TIME ☐ PART TIME		☐ FULL TIME		
Counties Where Available For Employment		Counties Where Available		
Other Employment Conditions		Other Employment Conditi	Other Employment Conditions	
Date Signature (Not required if submitting via e-mail.)				
Return to: Division of Personnel, P. O. Box 388, Jefferson City, MO 65102 Fax (573) 526-5382 Email: persmail@mail.state.mo.us				